		R			IVIDUAL IN report days wit			Y TRAINING				
AUTHORITY: 10 U.S. PRINCIPAL PURPOSE Ready Reserve. ROUTINE USES: Info DISCLOSURE IS VOL adversely affecting reti	S: To rmation UNTAR	record Reserve M n may be disclosed RY: Failure to prov	I to Federal, State	e, and	local agencies in	n the pursuit o	of their o	official duties.		·		
I. PERSONAL/PAY			elearly in ink)									
RANK	ANK LAST NAME SSN RPO (IMAs) / UNIT (Unit Reservists)											
			1					- ( -,/				
(MUST use separate fo	orm for	STATUS  pay and non-pay.  O applies to IMAs	· · ·					ENTIVE/SPECIALT	Y PAY	LOTUED (	0	. ,
PAY		ION-PAY	Only)		Aviation Career Incentive Pay (ACIP)  Hazardous Duty Incentive Pay (HDIP) (Provide authorizing documents)  OTHER (Specify)							
				<u> </u>	TYPE OF T		,,,,,,	(1 TOTAG GALTOTIZITE	g doddinonio)			
TRAINING PERIO	D	EQUIVALEN'	T TRAINING	C	Other (Specify):							
II. TRAINING DATA	(List	each day of train	ning separately)						RETENTION/RE	ETIREMENT	(R/R)	DATE
DATE YY/MM/DD		UTY HOURS RKED (Inclusive)	HOURS WORKED		NUMBER OF POINTS			TRAINING LC	OCATION/REMAR	RKS		
III. AUTHORIZATIO Complete and return See AFI 90-9, Chap in conjunction with the or more in any one of The Authorizing Office AUTHORIZING OFFICE	to res 4 and ne date lay. If cial is t	servist prior to the AFI 146-7, Chap e(s) shown above the duty is less t the commander o	QUARTERS AI e reservist repo o 5. Reservists e. On an IDT da than 8 hours or of the assigned	ND SU orting f s on In- ay, on is nor	UBSISTENCE for scheduled to active Duty Traily enlisted resen-	raining) aining (IDT) a ervists in pay r if the resen	are aut status vist is a	thorized to occupy s are authorized s an officer, the res WRITING. DATE (Must be s	y VOQ/VAQ, insubsistence-in-kervist MUST pa	number of cluding con kind if trainin ay the basic	trainin tract q ng is 8	quarters, hours charge.
No money	., 0 0	NOTO TO THE PARTY						first date of training	ng)		IORIZE	
										YES		NO
IV. CERTIFICATION	N (Cer	tifying official is t	he military men	nber o	or civilian who s	supervised th	ne train	ing and has know	vledge it was pe	erformed.)		
The penalty for willfu By signing and dating completion of all train	g this i	form, the Reserv	rist and Certifyir	ng Offi	ficial (training รเ	upervisor wh	o has i	knowledge trainin		ed) verify sa	ntisfac	tory:
RESERVIST'S NAME & PHONE (Type/Print legibly in Ink)  RESERVIST'S SIGNATURE (In Ink)  DATE												
CERT OFFICIAL'S NAM	ME/GR	ADE/PHONE (Type	e/Print legibly in	ink)	SIGNATURE (	(In Ink)				DATE		
V. DISTRIBUTION												
The <b>Certifying Offic</b> Non-Paid IDTs <b>not I</b>					•	,	IDTs, d	or HQ ARPC/MS	PPC-4 (IMAs a	nd RDs onl	/) for	

RE	ECORD OF INI Use to	_	NACTIVE DUT thin the same mont	_						
AUTHORITY: 10 U.S.C. 1332.  PRINCIPAL PURPOSES: To record Reserve Me Ready Reserve.  ROUTINE USES: Information may be disclosed DISCLOSURE IS VOLUNTARY: Failure to provi adversely affecting retirement actions.	to Federal, State, and	d local agencies in	n the pursuit of their o	official duties.		·				
I. PERSONAL/PAY DATA (Type or print cl	learly in ink)									
RANK LAST NAME		SSN		RPO (IMAs) / UNI	IT (Unit Reservist	's)				
PAY STATUS (MUST use separate form for pay and non-pay. Non-pay IDTs - submission to CRPO applies to IMAs Only)  Aviation Career Incentive Pay (ACIP)  OTHER (Specify)										
PAY NON-PAY		Aviation Career Incentive Pay (ACIP)  Hazardous Duty Incentive Pay (HDIP) (Provide authorizing documents)								
	•	TYPE OF T	RAINING							
TRAINING PERIOD EQUIVALENT	T TRAINING	Other (Specify):								
II. TRAINING DATA (List each day of traini	ing separately)				RETENTION/RE	TIREMENT (	(R/R) DATE			
DATE DUTY HOURS YY/MM/DD WORKED (Inclusive)	HOURS WORKED	NUMBER OF POINTS		TRAINING LC	CATION/REMAR	RKS				
TOTAL NUMBER  III. AUTHORIZATION FOR TRANSIENT C Complete and return to reservist prior to the  See AFI 90-9, Chap 4 and AFI 146-7, Chap in conjunction with the date(s) shown above or more in any one day. If the duty is less th The Authorizing Official is the commander of  AUTHORIZING OFFICIAL'S SIGNATURE AND T	e reservist reporting  5. Reservists on lie. On an IDT day, of han 8 hours or is not fithe assigned unit	for scheduled to nactive Duty Tra nly enlisted rese on-pay status, of	raining) aining (IDT) are aut ervists in pay status r if the reservist is a	horized to occupy s are authorized s an officer, the res WRITING.  DATE (Must be s	y VOQ/VAQ, inc subsistence-in-k ervist MUST pa same or prior to	number of to cluding contr ind if training y the basic i	raining days. ract quarters, g is 8 hours			
AUTHORIZING OFFICIALS SIGNATURE AND I	IIILE			first date of training		AUTHORIZED				
					Ī	YES	NO			
IV. CERTIFICATION (Certifying official is the	he military member	or civilian who s	upervised the train	ing and has know	/ledge it was pe	rformed.)	•			
The penalty for willfully making false claims a By signing and dating this form, the Reservi completion of all training period(s) listed in S	ist and Certifying Of	fficial (training รเ	upervisor who has l	knowledge trainin		ed) verify sat	isfactory			
RESERVIST'S NAME & PHONE (Type/Print legibly in Ink)  RESERVIST'S SIGNATURE (In Ink)  DATE										
CERT OFFICIAL'S NAME/GRADE/PHONE (Type	CERT OFFICIAL'S NAME/GRADE/PHONE (Type/Print legibly in ink)  SIGNATURE (In Ink)  DATE									
V. DISTRIBUTION		1								
The <b>Certifying Official will</b> send copy 1 to Non-Paid IDTs <b>not later than 2 duty days</b>		•	,	or HQ ARPC/MSi	PPC-4 (IMAs ar	nd RDs only	) for			

		R			IVIDUAL IN report days wit			Y TRAINING				
AUTHORITY: 10 U.S. PRINCIPAL PURPOSI Ready Reserve. ROUTINE USES: Info DISCLOSURE IS VOL adversely affecting rel	ES: To ormation .UNTAF	record Reserve M n may be disclosed RY: Failure to prov	l to Federal, Stat	te, and	local agencies in	n the pursuit of	f their c	official duties.		•		
I. PERSONAL/PAY			clearly in ink)									
LAST NAME SSN RPO (IMAs) / UNIT (Unit Reservists)												
(MUST use separate i	form for						INC	L ENTIVE/SPECIALT	Y PAY			
		PO applies to IMAs	Only)		Aviation Career Incentive Pay (ACIP)  Hazardous Duty Incentive Pay (HDIP) (Provide authorizing documents)							<i>fy)</i>
PAY	N	ION-PAY			Hazardous Duty Incentive Pay (HDIP) (Provide authorizing documents)  TYPE OF TRAINING							
TRAINING PERIO	חר	EOUIVALEN	IT TRAINING		Other (Specify):	RAINING						
u.					other (Specify):				RETENTION/RE	TIREMENT	(R/R)	DATE
II. TRAINING DATA	A (List	each day of trair	ning separately	)					INCTENTION/INC		(IVIV)	DATE
DATE YY/MM/DD		UTY HOURS RKED (Inclusive)	HOURS WORKED		NUMBER OF POINTS			TRAINING LO	OCATION/REMAR	RKS		
III. AUTHORIZATION Complete and return See AFI 90-9, Chap in conjunction with toor more in any one of The Authorizing Office AUTHORIZING OFFICE AUTHORIZING OFFICE COMPLETE THE AUTHORIZING OF	n to res 4 and he date day. It icial is	servist prior to the I AFI 146-7, Chap e(s) shown abov the duty is less the commander of	QUARTERS A e reservist repo o 5. Reservist: e. On an IDT o than 8 hours or of the assigned	ND SU orting to s on In lay, on r is no	JBSISTENCE for scheduled to active Duty Tra ly enlisted rese n-pay status, o	raining) aining (IDT) ar ervists in pay s r if the reservi	re auti status ist is a	horized to occup s are authorized s an officer, the res	y VOQ/VAQ, inc subsistence-in-k ervist MUST pa	number of cluding cont ind if trainin	trainii tract d ng is 8 food	quarters, 3 hours 1 charge.
AUTHORIZING OFFIC	CIAL'S	SIGNATURE AND	TITLE					first date of trainir		SUBS AUTH		
										YES		NO
IV. CERTIFICATIO	N (Ce	rtifying official is t	the military mei	mber c	or civilian who s	supervised the	e traini	ing and has know	/ledge it was pe	erformed.)		
The penalty for willfu By signing and datir completion of all trai	ng this	form, the Reserv	vist and Certifyi	ng Off	icial (training sເ	upervisor who	has l	knowledge trainin		ed) verify sa	itisfac	otory
RESERVIST'S NAME	& PHO	NE (Type/Print leg	iibly in Ink)		RESERVIST'S	SIGNATURE (	(In Ink)	)		DATE		
CERT OFFICIAL'S NA	CERT OFFICIAL'S NAME/GRADE/PHONE (Type/Print legibly in ink)  SIGNATURE (In Ink)  DATE											
V. DISTRIBUTION					ı				L			
The <b>Certifying Offi</b> Non-Paid IDTs <b>not</b>							DTs, d	or HQ ARPC/MS	PPC-4 (IMAs ai	nd RDs only	y) for	

		R		_	NACTIVE DUT thin the same mont	_	i			
AUTHORITY: 10 U.S.C PRINCIPAL PURPOSE Ready Reserve. ROUTINE USES: Inford DISCLOSURE IS VOLU- adversely affecting retir	S: To re mation m JNTARY	nay be disclosed : Failure to prov	lember's inactive dut	ty training for payme	ent, years of service on the pursuit of their o	credit, and determin		requirements for retention in		
I. PERSONAL/PAY			clearly in ink)							
RANK	ANK LAST NAME SSN RPO (IMAs) / UNIT (Unit Reservists)									
	PAY S1	TATUS.								
(MUST use separate fo	rm for pa	ay and non-pay.		T	INCI	ENTIVE/SPECIALT	Y PAY	T		
- submission t	_	applies to IMAs N-PAY	Only)	Aviation Career Incentive Pay (ACIP)  Hazardous Duty Incentive Pay (HDIP) (Provide authorizing documents)  OTHER (Specify)						
1			I	TYPE OF T		(1 TOVIGO GGATOTIZITI)	g documents)	<u> </u>		
TRAINING PERIOR	D	EQUIVALEN	T TRAINING	Other (Specify):	-					
II. TRAINING DATA	(List ea	ach day of trair	ning separately)				RETENTION/RE	TIREMENT (R/R) DATE		
DATE YY/MM/DD		Y HOURS ED (Inclusive)	HOURS WORKED	NUMBER OF POINTS		TRAINING LO	CATION/REMAR	rks		
Complete and return See AFI 90-9, Chap- in conjunction with th or more in any one do The Authorizing Office	N FOR to reser 4 and A e date(s ay. If the	TRANSIENT ( rvist prior to the FI 146-7, Chap s) shown abovi he duty is less to be commander of	e reservist reportir o 5. Reservists on e. On an IDT day, than 8 hours or is of the assigned un	SUBSISTENCE ng for scheduled to n Inactive Duty Tra only enlisted rese non-pay status, o	raining) aining (IDT) are aut ervists in pay status r if the reservist is a	thorized to occup s are authorized s an officer, the res WRITING.	y VOQ/VAQ, inc subsistence-in-k ervist MUST pa	number of training days.  Cluding contract quarters, ind if training is 8 hours y the basic food charge.		
AUTHORIZING OFFICI	AL'S SIC	GNATURE AND	TITLE			DATE (Must be s first date of training	•	SUBSISTENCE AUTHORIZED		
								YES NO		
IV. CERTIFICATION	N (Certif	fying official is t	the military membe	er or civilian who s	supervised the train	ing and has know	vledge it was pe	rformed.)		
The penalty for willful By signing and dating completion of all train	this for	rm, the Reserv	rist and Certifying	Official (training รเ	upervisor who has i	knowledge trainin		ed) verify satisfactory		
RESERVIST'S NAME & PHONE (Type/Print legibly in Ink)  RESERVIST'S SIGNATURE (In Ink)  DATE										
CERT OFFICIAL'S NAM	CERT OFFICIAL'S NAME/GRADE/PHONE (Type/Print legibly in ink)  SIGNATURE (In Ink)  DATE									
V. DISTRIBUTION										
The Certifying Offic Non-Paid IDTs not la		, .		• '	,	or HQ ARPC/MS	PPC-4 (IMAs ar	nd RDs only) for		